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48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FULL Friends of Farr]	
ADDRESS (number and street) 555 Capitol Mall, Suite 1425				
CITY, STATE, and ZIP CODE				
Sacramento	CA 958	14		
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)		4. FEC IDENTIFICATIO	N NUMBER
Sam Farr	House CA 20		C00290429	
5. ISTHIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON		/	/
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount
American Medical Association Political Action Committee			day, year)	
			10/30/2012	2500.00
25 MAssachusetts Avenue, NW, Suite			10/30/2012	2300.00
20 111 10000110011007 11011007 11117 00110	Transaction ID : INC.F65.15792			
	Occupation Occupation			
Washington DC 20001	Cocupation			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month, day, year)	Amount
	Occupation		-	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month, day, year)	Amount
	Occupation		_	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount
			day, year)	
	Occupation		-	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation		Date (month, day, year)	Amount
			-	
SIGNATURE (optional) Sidney Slade	[Electronically Filed]		For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100	

Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

